

## Application for a Water Right Permit



WA State Department of Ecology (SWRO)

Follow the	attached instructions. Attach additional sheets as necess	cary.	
GROU	ND WATER SURFACE WATER		
PERM.	ANENT SHORT TERM TEMPORA	ARY	
DROU	GHT		
*A NO	N-REFUNDABLE MINIMUM FEE OF \$50.00 MUST	ACCOMPANY T	HIS APPLICATION.
Section	1. APPLICANT		
] I hav	ve participated in a pre-application conference wit	th Ecology.	
	Business Name: CITY OF TACOMA, DEPT OF PUBLIC S, DBA TACOMA POWER	Phone No: (253) 502-8336	Other No:
Address: 3	628 SOUTH 35 <sup>TH</sup> STREET		
City: TAC	COMA	State: WA	Zip:98409-3192
Email Add	dress (if available):		
Contact N	ame (if different from above): CHAD DRUFFEL	Phone No: (253) 502-8073	Other No:
	rip to Applicant: TACOMA POWER / GENERATION / PLAN S / PRINCIPAL ENGINEER	T ENGINEERING A	ND CONSTRUCTION
Address: 3	3628 SOUTH 35 <sup>TH</sup> STREET		
City: TAC	COMA	State: WA	Zip: 98409-3192
Email Add	dress (if available): CDRUFFEL@CITYOFTACOMA.ORG		
CITY OF	d Owner or Part Owner Name of the Proposed Place of Use: TACOMA, DEPT OF PUBLIC UTILITIES, DBA TACOMA	Phone No: (253) 502-8336	Other No:
POWER Address: 3	3628 SOUTH 35 <sup>TH</sup> STREET		
City: TAC	COMA	State: WA	Zip:98409-3192
Email Add	dress (if available):		
For Ecology Use	APPLICATION NO: 52-30595  Fee Paid: Check No:		SEPA: Exempt/Not Exempt
Date Returne	7/0/		WRIA: 11 0 0000
	100		17 11 10000

Section 2. STATEMEN	T OF I	NTENT		
Do you own the land on which the If no, do you have legal authority to				
Briefly describe the purpose of you	ur propos	ed project: WATER FI	ROM LAKE KOK	SANEE WILL BE PUMPED
TO A FISH SUPPLEMENTATIO		• • • • • • • • • • • • • • • • • • • •		
WILL BE USED FOR CHINOOK				
FRY AND SMOLTS. THE FACI				,
CUSHMAN PROJECT LICENSE				
FEDERAL ENERGY REGULAT				
FBBBIGIE B. VBXO I TESO B.II	ORT CO	miniosion. Cob or	WATER TO THE	V CONSONII II V E.
Antiginated langth of time to game	aloto vous	project: ESTIMATED	COMPLETION	DATE IS ADDII 2014
Anticipated length of time to comp	olete you	project. ESTIMATEL	COMPLETION	DATE 15 APKIL 2014
Water Use List all purposes for w	hich wate	er will be applied to a b	eneficial use and	list quantity required for each.
Purpose(s) of Use	Rate	(check one box only)	Acre-Feet per	Period of Use
		Feet per Second (CFS) as per Minute (GPM)	Year (AF/YR) (If known)	(Continuously or Seasonal)
FISH PROPAGATION		ON-CONSUMPTIVE	4,000	CONTINUOUSLY
TOTAL:	6			
		2 2		
Short Term/Temporary Water U				_
Is this a request for a short term pr			non-recurring)?	∐ YES ⊠ NO
Is this request for a temporary peri	nit?	ES NO		
If yes to either question above, ind	icate the	dates that the water wil	l be needed:	
FROM:/TO: _	/	/		
		ž.		
Section 3. POINT OF D	IVEDS	ION OP WITHI	DAWAI	
(Complete A or B, and C below		TON OR WITH	NAWAL	
Complete A of D, and C below	)			
A.) If Surface Water Source		B.) If	Ground Water	Source
L				

Pre-application interviewer:

Spring Creek River Lake Other:	☐ Well(s) ☐ Cor:
Source Name: LAKE KOKANEE	Well diameter & depth:
Tributary to: SKOKOMISH RIVER	Number of proposed points of withdrawal:
	Do you have an existing well? YES NO
Number of proposed diversion points: 1  Do you have an existing diversion?   YES □ NO	If available, attach Water Well Report and pump test.  Well Tag ID No.

C.) Poi	nt of Dive	ersion/Wit	thdrawa	ıl –	Legal	Description			
	arcel No.	1/4			Section		Range		County
422	162222222	SE	NW	1	16	22	4W W.M		MASON
Lot(s) Block(s)					)	S	ubdivision		
If known	n, enter the	distances i	n feet fro	om 1	the poin	t of diversion	or withdrawal t	o the nea	arest section corner:
2180 F	eet ( No	orth/⊠ Sou	uth) and	183	0 fe	et ( East/	West)		
						corner of Secti			
P	arcel No.	1/4	1/4	$\Box$	Section	Township	Range		County
	Lot(s)		Bloc	k(s)	)	S	ubdivision		
If know	n, enter the	distances	in feet fro	m	the poin	t of diversion	or withdrawal t	o the nea	arest section corner:
fe	et ( Nor	th/\Bout	h) and		feet (	East/ We	st)		
						rner of Section			
									1
NOTE: If n	nore than tv	vo points of	diversion/	with	hdrawal	attach addition	al information or	i a separa	ate sheet of paper.
Section	n 4 PL	ACE OF	TISE						
				of t	he proi	erty (on whi	ch the water w	ill be us	ed) taken from a real
							y it carefully i		
LOT 126.	PLAT OF	LAKE CUS	HMAN N	Ю.	9 AS RE				AGES 84 THROUGH 87,
RECORL	OS OF MAS	SON COUN	IY, WAS	HIN	IGTON				4
1/4	1/4	Section	Twp.	R	Range		County		Parcel No.
SW	NE		22 N		and the second s	MASON			422165000126
			7						
D=	oll 4h = 1	anda an wh	: - l t l			of is 1.			
Do you o	wii all the i	ands on wi	nen me p	irop	osea pr	ace of use is it	ocated? XE	з Пис	·
If no, do y	ou have le	gal authori	ty to mal	ce t	his appl	ication for use	of another's la	nd? 🔲 Y	YES NO
Provide owner name(s), address, and phone number:									
Are there	any other	water rights	or clain	ns a	ssociate	d with this pro	operty or water	system?	⊠ YES □ NO
	•	Ü							S/CONTROL NUMBERS
									-
									OJECT INCLUDE:
PERMIT NUMBERS 1956, 18, 1957, 112, 8814, AND CONTROL NUMBERS S2-27419, S2-30504, R2-30508,									
S2-27420, S2-30505, R2-30509, S2-30506, G2-30507. WATER FOR EGG INCUBATION IS GRANTED FROM									
THE LAKE CUSHMAN MAINTENANCE COMPANY PERMIT G2-29383.									

Attach a map of your project showing the point of diversion/withdrawal and place of use. If platted property, be sure to include a complete copy of the plat map.

Section 5. WATER SYSTEM DESCR	IPTION
source):	and size of devices used to divert or withdraw water from  ANEE, A 128-ACRE LAKE WITH A GROSS STORAGE
	DL (ELEVATION 480 FEET TACOMA DATUM). PUMPS
	MP WATER FROM LAKE KOKANEE TO A HEAD-TANK
	APPROXIMATELY 0.35 ACRE-FEET. FROM THE HEAD-
TANK, WATER WILL BE DELIVERED VIA AN	
	SIDE OF LAKE KOKANEE. AFTER THE WATER HAS
	TION FACILITY, IT WILL BE DISCHARGED TO THE
	7-LEVEL OUTLET VIA AN UNDERWATER PIPELINE.
SHOP OF THE EOW	ELVEBOOTEST VIKTIN ON SEKWATER (THE ESTA).
The Arms of the second	
Section 6. DOMESTIC WATER SUP	PPLY SYSTEM INFORMATION
(Complete A <u>or</u> B, and C below)	
A.) Domestic Water Systems only	B.) Municipal Water Systems only (defined under RCW 90.03.015)
Projected number of connections to be served:	Present population to be served water:
Type of connections:	Estimate future population to be served:(20 year projection)
C.) Water System Planning	
Do you have a Water System Plan approved by the Division?   YES   NO	Washington State Department of Health, Drinking Water
If yes, date plan was approved//	Water System Number:

Name of water system:			
Are you within the service area of an exi	isting water system?	YES NO	
If yes, explain why you are unable to con	nnect to the system:_		

Total number of acres requested to be irrigated under this application = NOTE: Outline the area to be irrigated on your attached map.  Stockwater  List number and kind of stock:    Stockwater	Irrigation		
Stockwater  List number and kind of stock:  Is the proposed project for a dairy farm? YES NO  Other Proposed Farm Uses Describe all proposed uses:  Family Farm Water Act (RCW 90.66): Calculate the acreage in which you have a controlling interest, including only:  • Acreage proposed to be irrigated under this application, and  • Acreage proposed to be irrigated under other pending application(s).  Is the combined acreage under existing rights greater than 6000 acres? YES NO  Do you have a controlling interest in a Family Farm Development Permit? YES NO  If yes, enter Permit No:  Section 8. OTHER WATER USES  Hydropower Indicate total feet of head		rigated under this application =	ACRES
List number and kind of stock:    Is the proposed project for a dairy farm?   YES   NO			
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FERC License No:  Mining/Industrial Use			
FERC License No:  Mining/Industrial Use			
Mining/Industrial Use	Indicate all uses to which power is to be	e applied:	
	FERC License No:		
	Mining/Industrial Use		
		utilizing water:	
			· ·

FISH PROPAGATION
Section 9. WATER STORAGE
Will you be using a dam, dike, or other structure to retain or store water? ☐ YES ☒ NO
Are you proposing to store more than 10 acre-feet of water?  YES  NO
Will the water depth be 10 feet or more? ☐ YES ⊠ NO
If you answered yes to any of the above questions, please describe:
Tryou answered yes to any or the above questions, piease desertoe.
NOTE IS THE TOTAL PROPERTY OF THE TOTAL PROP
NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest poin and some portion of the storage will be above grade, you must also complete an Application for Permit to Construct a Reservoir and a Dam Construction Permit and Application.
Section 10. DRIVING DIRECTIONS
Provide detailed driving directions to the project site: FROM OLYMPIA, TAKE HIGHWAY 101 NORTH TO
HOODSPORT. ABOUT 2.7 MILES SOUTH OF HOODSPORT, CUSHMAN POWERHOUSE NO. 2 IS ON
THE LEFT SIDE OF THE ROAD. AT HOODSPORT, TURN LEFT ONTO STATE ROUTE 119 (LAKE
CUSHMAN ROAD). FOLLOW LAKE CUSHMAN ROAD 2.5 MILES TO THE CUSHMAN POTLATCH
ROAD AND TURN LEFT. FOLLOW THE CUSHMAN POTLATCH ROAD TO LOWER LAKE ROAD AND
TURN RIGHT. FOLLOW LOWER LAKE ROAD ABOUT 0.3 MILES TO CUSHMAN NO. 2 DAM.
Site Address:

## Section 11. REQUIRED SIGNATURES

I certify that the information provided in this application is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though the employees of the Department of Ecology may have assisted me in the preparation of the above application, all responsibility for the accuracy of the information rests with me, the applicant.

Print Name (Applicant or authorized representation Particle McCarperint Name (Legal Owner or Part Owner Place)	Signature Signature	3/7/12 Date 3-7-12 Date
Print Name (Legal Owner or Part Owner Place		Date which the project is located:
*Submit your application to:  DEPARTMENT OF ECOLOGY CASHIERING SECTION PO BOX 47611 OLYMPIA, WA 98504-7611	Central Regional Office 15 W Yakima Avenue, Suite 200 Yakima, WA 98902 (509) 575-2490	Eastern Regional Office 4601 N. Monroe Spokane, WA 99205-1295 (509) 329-3400
	Northwest Regional Office 3190 – 160 <sup>th</sup> Avenue SE Bellevue, WA 98008-5452 (425) 649-7000	Southwest Regional Office PO Box 47775 Olympia, WA 98504-7775 (360) 407-6300

ECY 040-1-14 (Rev. 7-26-11) If you need this document in an alternate format, please call the Water Resources Program at 360-407-6872. Persons with hearing loss can call 711 for Washington Relay Service. Persons with a speech disability can call 877-833-6341.

If you have questions about your application, contact the Water Resources program at the regional office in which your project is located.

